PTO/SB/06 (12-04) Approved for use through 7/31/2008. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 **SPPLICATION AS FILED - PART I OTHER THAN** (Column 1) SMALL ENTITY OR (Column 2) SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA RATE (\$) FEE (\$) RATE (\$) BASIC FEE FEE (\$) G7 CFR 1.16(a), (b), or (c)) SEARCH FEE (37 CFR 1.16(ld), (l), or (m)) **EXAMINATION FEE** (37 CFR 1.16(o), (p), or (q1) TOTAL CLAIMS (37 CFR 1.16(I)) OR INDEPENDENT CLAIMS (37 CFR 1.16(h)) x /07)= If the specification and drawings exceed 100 APPLICATION SIZE sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each (37 CFR 1.16(a)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(D) 80 360 \* If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II 3 OTHER THAN (Column 1) (Calumn 2) OR (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE (\$) AFTER MENDMENT ADDI-TIONAL RATE (S) ADDI-TIONAL PREVIOUSLY **EXTRA** FEE (\$) FEE (8) Total (27 CFR 1.180) 200 96, A *50* • OR 1 Minus 100 Y)00C AU) • OR Application Size Fee (37 CFR 1.16(a)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (87 CFR 1.18(1)) 360 180 OR TOTAL ADD'L FEE 100 ADD'L FEE OR (Column 1) (Column 2) (Column 3) CLAIMS REMAINING HIGHEST NUMBER PRESENT RATE (\$) ADDI-RATE (\$) ADDI-**AFTER** PREVIOUSLY **EXTRA** TIONAL AMENDMENT TIONAL PAID FOR FEE (\$) FEE (S) Total (37 CFR 1.16(机) Minus AMENDM ×25. 50 OR Independent (37 CFR 1.1801) Minus × 100 = 200. OR Application Stze Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(I)) 180 *360* OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". The "Highest Number Previously Paid For" (IT THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

The Highest Number Previousy Paki For (10xx) or independently is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								70094075		
CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2)						SMALL E	NTITY	QR	OTHER SMALL E	
FOR NUMBER FILED M				MUMBE	REXTRA	RATE	FEE		RATE	FEE
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	PENDENT CLAM FR 1.15(M)	<u> </u>	Ominus 1 • .			*3•	84	OR	**	
MALTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(43)						<u> </u>	/	<b>O</b> R	<u></u>	
" If the difference in column 1 is less than zero, enter "O" in column 2.						TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II										
	(Column 1) (Column 2) (Column 3)					SMALL E	ENTITY	<b>O</b> R	OTHER SMALL	
ENT A		CLAIMS REMAINDIG AFTER. AMERICAENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADOI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ME	Total costu filo to	1218	Minus	- 51	•	x 5 •		OR	x s	
ENDM	Independent pr offi 1,1900	· CA	Minus	G	•	x 8•		QR	x 5	
₹	FIRST PRESENT	ATION OF MULTIPU	E DEPENDE	INT CLAIM (ST CF	R 1,15(6)	1		OR	••_	
						ADOL FEE		OR	TOTAL ADD'L FEE	
9-16-5 5(Column 1) (Column 2) (Column 3)										
æ	•.	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADOI- TIONAL FEE
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	Independent GP GFR 1.160/0	· X _	Minus	<i> 9</i>	•	x s		OR	x 5	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (ST O'FR L.16(8))						+3		OR		
TOTAL ADDIL FEE							<u> </u>	OR	ADD'L FEE	
(Column 1) (Column 2) (Column 3)										
υĘ		CLAIMS REMAINING AFTER AMENOMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADOI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ENDMENT	Total gr cFR 1.19(c)	•	Minus	••	•	x s		OR	× 5	
	Independent pr OFR 1,14000	•	Minus	***	*	× 6		_ or	x 3	
₹	PREST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 CFR 1.18(4))					<u> </u>		OR.	<u> </u>	
	<u> </u>					TOTAL ADD'L FEE	,	OR	TOTAL ADD'L FEE	
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the T-fighest Number Previously Paid For DI THIS SPACE is less than 20, enter "20".										

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "2".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number bound in the appropriate box in column 1.

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